

08/24/01

11003 U.S. PTO

11017 U.S. PTO  
09/935703

08/24/01

Please type a sign (+) inside this box.  $\pm$  PTO/SB/05 (08-00)

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Approved for use through 10/31/2002. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR § 1.53(b))

Attorney Docket No.		PT050P1
First Inventor		Shi et al.
Title	Protein Tyrosine Phosphatase Polynucleotides, Polypeptides, and Antibodies	
Express Mail Label No.		

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 269]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix+
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets     ]
5. ☒ Unexecuted Oath or Declaration Total Pages 2
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)
  - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§ 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76.

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☒ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☒ paper (8 pages)
  - c. Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet and document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement/ Form PTO/SB/08  
☐ Copies of Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(should be specifically itemized)
15. ☐ Certified copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Other:

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-Part (CIP)

of prior application No: PCT/US01/05496

Prior application information:

Examiner

Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Label

22195

or ☐ Correspondence address below

NAME

ADDRESS

CITY

STATE

COUNTRY

TELEPHONE

ZIP CODE

FAX

NAME (Print/Type)

Kenley K. Hoover

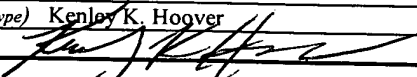
Registration No. (Attorney/Agent)

40,302

SIGNATURE

Date August 24, 2001

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1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number <b>08-3425</b> Deposit Account Name <b>Human Genome Sciences, Inc.</b>  <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17  <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27  2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other* Charge any deficiencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to Deposit Account No. 08-3425				3. ADDITIONAL FEES																																																																																																																																																																													
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Name (Print/Type) Kenley K. Hoover				Registration No.: 40,302																																																																																																																																																																													
Signature: 				Telephone		301-309-8504																																																																																																																																																																											
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